


PRESENTING CLINICAL SIGNS

History: Grade 3/6 murmur. Lethargy. Previous echo one year ago showed trace MR.

DATE

8/11/22

ECHOCARDIOGRAPHIC FINDINGS

2D, M-mode, and Doppler study.

PERFORMED BY:

Shari Reffi, CVT

INTERPRETED BY

 Keith Blass, DVM,
 MS, DACVIM
 (Cardiology)

There is moderate left atrial dilation. There is mild hypertrophy of the basilar portion of the interventricular septum. Left ventricular posterior wall thickness is normal. Left ventricular internal dimensions are normal. Left ventricular systolic function is hyperdynamic. There is systolic anterior motion of the mitral valve leaflets creating dynamic obstruction to flow in the left ventricular outflow tract, with mild secondary mitral regurgitation. The aorta and aortic valve are normal. Right atrial and right ventricular dimensions are normal. The tricuspid valve leaflets are mildly thickened, and a mild jet of tricuspid regurgitation is present. TR velocity does not suggest the presence of pulmonary hypertension. The pulmonary artery and pulmonic valve appear normal, though trace pulmonic insufficiency is present. No shunting lesions are visualized. No pericardial effusion or cardiac masses are seen.

PATIENT

Snowball Ahmed

 LA/Ao – 2.02
 IVSd – 6.2 mm
 LVPWd – 4.9 mm
 LVIDd – 15.2 mm
 LVIDs – 6.8 mm
 FS – 55%
 LVOT – 4.34 m/s
 RVOT – 1.08 m/s

SPECIES

Feline

ASSESSMENT/RECOMMENDATIONS
BREED

Persian

Hypertrophic obstructive cardiomyopathy (HOCM)

SEX

MN

AGE

22 mo

This examination demonstrates mild hypertrophy of the basilar portion of Snowball's interventricular septum, consistent with an asymmetric variant of HCM. Associated with his hypertrophy, Snowball has systolic anterior motion (SAM) of his mitral valve leaflets, which is creating dynamic obstruction to flow in his left ventricular outflow tract. Secondary to Snowball's disease, he has moderate dilation of his left atrium. Given this, Snowball is at risk for the development of congestive heart failure, thromboembolic disease, and arrhythmia formation, therefore, careful monitoring for signs associated with these conditions is recommended. Whether Snowball's lethargy is cardiogenic in origin is difficult to say, but it's possible that a decrease in his cardiac output could be the cause.

I recommend starting Snowball on enalapril (2.5 mg am, 1.25 mg pm) and clopidogrel (18.75 mg SID), as the former possesses cardioprotective properties, while the latter should help to decrease his risk for cardiac thrombus formation.

WEIGHT

9.68 lb

A renal/electrolyte profile is recommended in 1-2 weeks. A recheck echocardiogram is recommended in 6 months. Thoracic radiographs are recommended if Snowball experiences respiratory clinical signs.

HOSPITAL NAME

Ridge Road AH

REFERRING VET

Dr. Pathak



DATE

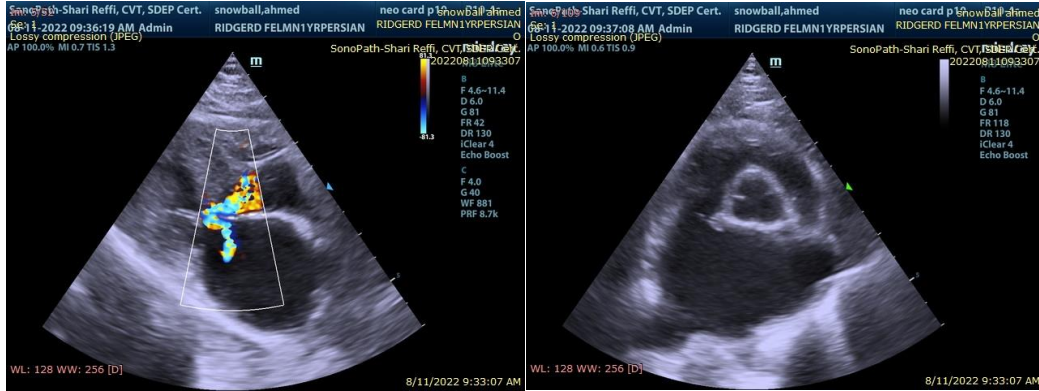
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

PATIENT

Snowball Ahmed

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Keith Blass, DVM, MS, DACVIM (Cardiology)
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631-804-5754

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